Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 1 of 41

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	Anita First name	First name
	picture identification (for example, your driver's	F	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Gulley	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9523	

Entered 09/30/17 20:14:05 Page 2 of 41 Case 17-82305 Doc 1 Filed 09/30/17 Desc Main Document

Case number (if known)

Debtor 1 Anita F Gulley

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
	Include trade names and doing business as names	Business name(s)				
		EINs	EINs			
5.	Where you live	427 1/2 N 6th St	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Ogle				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Entered 09/30/17 20:14:05 Page 3 of 41 Case 17-82305 Doc 1 Filed 09/30/17 Desc Main

Document Case number (if known) Debtor 1 Anita F Gulley

Par	t 2: Tell the Court About	our Ba	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> a page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bebox.	ankruptcy		
	choosing to file under	■ Chapter 7							
		□ Chapter 11							
		_	napter 12						
		☐ Ch	napter 13						
			•						
8.	How you will pay the fee		about how yo order. If your	pay the entire fee when I file my petition. Please check with the clerk's office in your local court for m how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or printed address.					
						n, sign and attach the Application for Individ	uals to Pay		
		_	Ū		s (Official Form 103A).	only if you are filing for Chanter 7. By law a	viudae may		
I request that my fee be waived (You may request this option only if you are filing for Chapter but is not required to, waive your fee, and may do so only if your income is less than 150% of the applies to your family size and you are unable to pay the fee in installments). If you choose this					ur income is less than 150% of the official poinstallments). If you choose this option, you	verty line that			
			the Application	on to Have the C	Chapter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye			Mhon	Coop number			
			District		When When				
			District		When	Case number Case number			
			District		wrien	Case number			
10.	Are any bankruptcy cases pending or being	■ No	ı						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	□ No	. Go to I	ine 12.					
	residence?	■ Ye	Hoove	our landlord obta	ined an eviction judgment against	you and do you want to stay in your residen	ice?		
		— 16	s.	No. Go to line 1	12.				
			_			hadamaant Assainat Van (Farra 1011) a 1921	4		
				yes. Fill out <i>Ini</i> bankruptcy peti		<i>ludgment Against You</i> (Form 101A) and file i	t with this		

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

Debtor 1	Anita F Gulley	Document	Page 4 of 41 Case number (if known)	
Port 2:	Papart About Any Rusinesses Vou Own as a	Sala Proprietor		

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code			
	it to this petition.		Check	the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chap	ter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any		IC Constant					
	property that needs immediate attention?			ate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

Debtor 1 Anita F Gulley Decument Page 5 of 41 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 6 of 41 Case number (if known)

Deb	otor 1 Anita F Gulley		Document	- 1 age 0 01 41	Case number (if k	nown)
Par	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?		Are your debts primarily consindividual primarily for a persona			in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
			Are your debts primarily busing money for a business or investm			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consumer de	ebts or business de	bts
17.	Are you filing under Chapter 7?	□ No.	l am not filing under Chapter 7.	Go to line 18.		
Do you estimate that after any exempt property is excluded an			l am filing under Chapter 7. Do y are paid that funds will be availa			is excluded and administrative expenses
	administrative expenses		■ No			
are paid that funds will be available for distribution to unsecure creditors?			□ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10 ii \$10,000,001 - \$50 \$50,000,001 - \$10 \$100,000,001 - \$5) million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 i □ \$10,000,001 - \$50 □ \$50,000,001 - \$10 □ \$100,000,001 - \$5) million 00 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Par	7: Sign Below					
For	you	I have exa	mined this petition, and I declare	e under penalty of perjury	that the information	n provided is true and correct.
			nosen to file under Chapter 7, I at tes Code. I understand the relie			er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.
			ney represents me and I did not I have obtained and read the no			attorney to help me fill out this
		I request r	elief in accordance with the chap	oter of title 11, United Sta	ites Code, specified	d in this petition.
			/ case can result in fines up to \$			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Anita F C		Sign	ature of Debtor 2	
		Executed	September 30, 2017 MM / DD / YYYY	Exec	cuted on MM / DE	D/YYYY

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 7 of 41

Debtor 1 Anita F Gulley Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stephe	n A. Clark	Date	September 30, 2017	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Stephen A	Clark			
	A. Ciai k			
Printed name				
Stephen A	A. Clark, Attorney at Law			
Firm name	· •			
PO Box 68	33			
DeKalb, IL	. 60115-0683			
Number, Street,	City, State & ZIP Code			
Contact phone	815-766-2160	Email address	sc@clarkbklaw.com	
6296092				
Bar number & S	state			

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

	DOCUME	eni Page 8 0141	
mation to identify your	case:		
Anita F Gulley			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Anita F Gulley First Name	Anita F Gulley First Name Middle Name First Name Middle Name	Anita F Gulley First Name Middle Name Last Name First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1.			ssets of what you own
	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,026.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,026.00
Part	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	3,501.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	53,016.61
	Your total liabilities	\$	56,517.61
Part	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,555.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,800.38
Part	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 09/30/17 20:14:05 Desc Main Case 17-82305 Doc 1 Filed 09/30/17 Document

Page 9 of 41 Case number (if known) Debtor 1 Anita F Gulley

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

2,490.19

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
From Fart 4 on Generalize 217, Gopy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

			Documen	t Page 10 of 41		
Fill in	this info	rmation to identify your	case and this filing:			
Debto	or 1	Anita F Gulley				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e, if filing)	First Name	Middle Name	Last Name		
		See leaves to a Occupt for the	NODTHERN DISTRICT OF	- II I INOIC		
United	d States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS		
Case	number					☐ Check if this is an
						amended filing
Offi	cial F	orm 106A/B				
		le A/B: Prop	ortv			40/45
					P. A. d	12/15
			oe items. List an asset only onc ate as possible. If two married			
	ation. If mo		a separate sheet to this form.	On the top of any additional pa	iges, write your name and case	e number (if known).
	_					
Part 1	Describ	e Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do y	you own o	r have any legal or equitab	le interest in any residence, bui	ilding, land, or similar property	?	
	No. Go to P					
_ `						
ЦY	res. Where	e is the property?				
Part 2	Describ	e Your Vehicles				
	_		* 11 1 4 4 4 1			
			uitable interest in any vehic cle, also report it on Schedule			ehicles you own that
		•	•			
3. Ca ı	rs, vans, t	trucks, tractors, sport u	tility vehicles, motorcycles			
	No					
I	res .					
3.1	Make:	Pontiac	Who has an interes	t in the property? Check one	Do not deduct secured cla the amount of any secure	•
	Model:	Grand Am	Debtor 1 only		Creditors Who Have Clair	
	Year:	2003	Debtor 2 only		Current value of the	Current value of the
	Approxim	ate mileage: 19	Debtor 1 and Deb	otor 2 only	entire property?	portion you own?
	Other info	ormation:	At least one of the	e debtors and another		
			☐ Check if this is o	community property	\$337.00	\$337.00
			(see instructions)	community property		
4. Wa	tercraft.	aircraft, motor homes, A	ATVs and other recreational	vehicles, other vehicles, a	nd accessories	
			sonal watercraft, fishing vesse			
	.1.					
■ N						
	res					
5 A d	ld the dol	llar value of the portion	you own for all of your entr	ries from Part 2, including a	inv entries for	
			. Write that number here			\$337.00
	_					
		e Your Personal and Hous				
Do yo	ou own o	r have any legal or equi	table interest in any of the f	ollowing items?		Current value of the oortion you own?
						Do not deduct secured
6 Цс.	usobold	noode and furnishings			(claims or exemptions.
		goods and furnishings ⁄lajor appliances, furniture	e, linens, china, kitchenware			

Official Form 106A/B Schedule A/B: Property

□ No

Debtor 1	Anita F Gulley	Document Page 11 of 41	Desc Main
■ Yes.	Describe		
	[misc. household goods & furnishings	\$200.00
□ No	les: Televisions and	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	collections; electronic devices
		32" HDTV, Samsung ZTE cell phone	\$100.00
Examp		igurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi ns, memorabilia, collectibles	n, or baseball card collections;
	[crystal pitcher, butter dish, serving platter	\$50.00
10. Firear Exam No ☐ Yes. 11. Clothe Exam ☐ No	ples: Pistols, rifles, Describe	shotguns, ammunition, and related equipment thes, furs, leather coats, designer wear, shoes, accessories	
	[necessary clothing, outerwear	\$550.00
☐ No	ples: Everyday jew Describe	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, women's costume jewelry	gold, silver
Exam No □ Yes. 14. Any o ■ No	arm animals ples: Dogs, cats, bi Describe ther personal and Give specific inform	household items you did not already list, including any health aids you did not list	
		f all of your entries from Part 3, including any entries for pages you have attached umber here	\$950.00

Official Form 106A/B Schedule A/B: Property

page 2

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 12 of 41 Debtor 1 Case number (if known) **Anita F Gulley** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Resource Bank \$15.00 17.1. **Savings** Resource Bank \$30.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No
□ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No □ Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): Schedule A/B: Property

_		Case 17-82305	Doc 1	Filed 09/30/17 Document	Page 13 of 41		Desc Main
De	btor 1	Anita F Gulley				ase number (if known)	
	■ No	, equitable or future inter		erty (other than anythin	g listed in line 1), and	rights or powers exe	rcisable for your benefit
	Exam _l ■ No	s, copyrights, trademark oles: Internet domain name	es, websites, p			s	
	Exam _l ■ No	es, franchises, and other oles: Building permits, excl Give specific information	usive licenses		n holdings, liquor license	es, professional licens	es
Мо	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
I	□ No	funds owed to you Give specific information a	about them, in	cluding whether you alre	ady filed the returns and	d the tax years	
				cipated 2017 federal on withholdings pai filing		Federal	\$1,644.00
	Exam _l ■ No	support bles: Past due or lump sum Give specific information		usal support, child suppo	ort, maintenance, divorc	e settlement, property	settlement
I	Exam _l ■ No	amounts someone owes bles: Unpaid wages, disabi benefits; unpaid loan Give specific information.	lity insurance s you made to		efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
	Exam _l ■ No	sts in insurance policies oles: Health, disability, or li		,	HSA); credit, homeowne	er's, or renter's insurar	nce
	⊔ Yes.	Name the insurance comp Cor	pany of each p npany name:	oolicy and list its value.	Beneficiary	<i>y</i> :	Surrender or refund value:
ı	If you somed	terest in property that is are the beneficiary of a livione has died. Give specific information.	ng trust, expe			urrently entitled to rece	eive property because
	Exam _l ■ No	against third parties, wholes: Accidents, employments Describe each claim	nt disputes, in			or payment	
	■ No	contingent and unliquida Describe each claim		f every nature, including	g counterclaims of the	e debtor and rights to	set off claims

		Case 17-82305	Doc 1 F	iled 09/30/17 Document	Entered 09 Page 14 of	9/30/17 20:14:05	Desc Main
Debt	or 1	Anita F Gulley		Document		Case number (if known)	
35. A	ny fin	ancial assets you did not	already list				
	No						
	Yes.	Give specific information					
		he dollar value of all of your street 4. Write that number he					\$1,739.00
Port A	T Do	scribe Any Business-Related	Bronorty Vou Ow	n or Hove on Interest	In I jot any rool oots	ate in Bort 1	
		-				ite in Part 1.	
	-	own or have any legal or equi	itable interest in a	ny business-related p	roperty?		
_		to Part 6.					
П	Yes. G	So to line 38.					
Part 6		scribe Any Farm- and Commo			n or Have an Interes	st In.	
46. D	o you	own or have any legal or	equitable inter	est in any farm- or o	commercial fishin	g-related property?	
ı	No.	Go to Part 7.					
[☐ Yes.	. Go to line 47.					
Part 7	7:	Describe All Property You	Own or Have an In	iterest in That You Did	l Not List Above		
		have other property of a					
		ples: Season tickets, country	y club membersh	iip			
	No	0					
Ц	Yes.	Give specific information					
54.	Add t	he dollar value of all of yo	our entries from	Part 7. Write that n	umber here		\$0.00
Part 8	8:	List the Totals of Each Part	of this Form				
55.	Part 1	: Total real estate, line 2					\$0.00
56.	Part 2	2: Total vehicles, line 5			\$337.00		
57.	Part 3	3: Total personal and hou	sehold items, lir	ne 15	\$950.00		
58.	Part 4	l: Total financial assets, li	ine 36		\$1,739.00		
59.	Part 5	ភ: Total business-related រ	property, line 45	<u></u>	\$0.00		
60.	Part 6	6: Total farm- and fishing-	related property	, line 52	\$0.00		
61.	Part 7	7: Total other property not	t listed, line 54	+	\$0.00		
62.	Total	personal property. Add lir	nes 56 through 6°	1	\$3,026.00	Copy personal property t	otal \$3,026.0 0
63.	Total	of all property on Schedu	ıle A/B. Add line	55 + line 62			\$3,026.00

Official Form 106A/B Schedule A/B: Property page 5

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

		170.0.11111.	III I (1) III I I I I I I I I I I I I I I I I I	
Fill in this inforr	mation to identify your	case:		
Debtor 1	Anita F Gulley			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is a
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2003 Pontiac Grand Am 195000 miles Line from Schedule A/B: 3.1	\$337.00		\$337.00	735 ILCS 5/12-1001(c)
Elle Holli Geriedale A.B. G.1			100% of fair market value, up to any applicable statutory limit	
misc. household goods & furnishings	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
32" HDTV, Samsung ZTE cell phone Line from Schedule A/B: 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Holli Genedale Av.D. 7-1			100% of fair market value, up to any applicable statutory limit	
crystal pitcher, butter dish, serving platter	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
necessary clothing, outerwear	\$550.00		\$550.00	735 ILCS 5/12-1001(a)
Line Ironi Scriedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 16 of 41

De	btor 1	Anita F Gulley	Document	·	Case number (if known)	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		nen's costume jewelry from <i>Schedule A/B</i> : 12.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
					100% of fair market value, up to any applicable statutory limit	
	Casi	1 from S <i>chedule A/B</i> : 16.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
ļ	LINE	Tom Schedule A/D. 19.1			100% of fair market value, up to any applicable statutory limit	
		ngs: Resource Bank	\$15.00		\$15.00	735 ILCS 5/12-1001(b)
	LINE	Tom Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	
		cking: Resource Bank	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	LINE	iom schedule A/B. 1112			100% of fair market value, up to any applicable statutory limit	
		eral: anticipated 2017 federal tax	\$1,644.00		\$1,644.00	735 ILCS 5/12-1001(b)
	date	of case filing from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subj	vou claiming a homestead exemption of ect to adjustment on 4/01/19 and every 3			led on or after the date of adjustmen	nt.)
		No				
		Yes. Did you acquire the property covere ☐ No	ed by the exemption wi	thin 1	,215 days before you filed this case?	?

Yes

	Case	17-82305	Doc 1	Filed 09/30/17 Document	Entered Page 17	d 09/30/17 20:1	L4:05	Desc M	1ain
Fill i	n this informatio	n to identify you	r case:						
Debt	tor 1 A	nita F Gulley							
	Fir	rst Name	Mic	ddle Name	Last Name				
Debt (Spou	_	rst Name	Mic	ddle Name	Last Name				
Unite	ed States Bankrup	otcy Court for the:	NORTH	HERN DISTRICT OF ILL	INOIS				
Case	e number							☐ Check	if this is an
								amend	ded filing
	cial Form 10 nedule D:		Who I	Have Claims :	Secured	l by Property	/		12/15
s nee				ed people are filing togethe the entries, and attach it t					
. Do	any creditors have	claims secured by	your prope	rty?					
[☐ No. Check this	box and submit th	nis form to t	the court with your other	schedules. Yo	ou have nothing else to	report on	this form.	
ı	Yes. Fill in all o	of the information	below.						
Part	1: List All Sec	cured Claims							
			more than on	e secured claim, list the cree	ditor separately	Column A	Column B	(Column C
for ea	ach claim. If more th	nan one creditor has	a particular	claim, list the other creditors ording to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of or that supp claim		Unsecured portion If any
2.1	Centralill		Describe t	he property that secures t	the claim:	\$3,501.00		\$337.00	\$3,164.00
	Creditor's Name		2003 Po miles	ntiac Grand Am 1950	000				
	2587a Sycamo De Kalb, IL 60		As of the dapply.	late you file, the claim is:	Check all that				
	Number, Street, City,	State & Zip Code	Unliquid						
Who	owes the debt? (Check one.	☐ Dispute	d lien. Check all that apply.					
■ D	ebtor 1 only		An agre	eement you made (such as r	mortgage or sec	ured			
	ebtor 2 only		car loa						
\square D	ebtor 1 and Debtor 2	2 only	☐ Statutor	ry lien (such as tax lien, med	chanic's lien)				
	t least one of the del		☐ Judgme	ent lien from a lawsuit					
	heck if this claim re community debt	elates to a	Other (i	ncluding a right to offset)					
		Opened 11/17/16							
Date	debt was incurred	Last Active 6/16/17	Las	t 4 digits of account numb	ber 5901				

Add the dollar value of your entries in Column A on this page. Write that number here: \$3,501.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$3,501.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

			Doci	ıment	Page 1	8 of 41	-	
Fill in 1	this inform	ation to identify your	case:					
Debtor	1	Anita F Gulley						
		First Name	Middle Name		Last Name			
Debtor (Spouse i		First Name	Middle Name		Last Name			
United	States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILL	INOIS			
O						_		
(if known	iumber							Check if this is an amended filing
		106E/F /F: Creditors W	/ho Have Uns	ecured (Claims			12/15
ny exec schedul schedul eft. Atta	cutory contr e G: Execute e D: Credito ich the Cont id case num	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec	that could result in a c ired Leases (Official F ured by Property. If mo ge. If you have no infor	claim. Also lis orm 106G). Do ore space is n	st executory of not include eeded, copy	Part 2 for creditors with NONI contracts on Schedule A/B: P any creditors with partially se the Part you need, fill it out, rd on ot file that Part. On the to	roperty (Off ecured clain umber the	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
		s have priority unsecure						
_	No. Go to Pa	• •						
_	Yes.							
L Part 2:		of Your NONPRIORIT	Y Unsecured Claim	s				
		s have nonpriority unsec						
	•	e nothing to report in this p			our other ech	odulos		
_		e nothing to report in this p	art. Submit this form to	ine count with y	our other some	cuules.		
	Yes.							
uns	ecured claim n one credito	, list the creditor separatel	y for each claim. For each	ch claim listed,	identify what t	holds each claim. If a credito ype of claim it is. Do not list cla three nonpriority unsecured cla	ims already	included in Part 1. If more
								Total claim
4.1	Allied B	usiness Accounts,	Inc. Last 4	digits of acco	unt number	C607		\$5,206.68
	Nonpriority	Creditor's Name		_				Ψ0,200.00
	PO Box Clinton.	IA 52733-1600	wnen	was the debt i	incurreu r	2010		_
		reet City State Zlp Code	As of t	he date you fi	le, the claim i	s: Check all that apply		
	Who incur	red the debt? Check one.						
	■ Debtor ′	1 only	☐ Coi	ntingent				
	Debtor 2	2 only	☐ Unl	iquidated				
	Debtor '	1 and Debtor 2 only	☐ Dis	puted				
	☐ At least	one of the debtors and an	-	of NONPRIORI	TY unsecured	d claim:		
		f this claim is for a com		dent loans				
	debt Is the clain	n subject to offset?		ligations arising as priority claim		ration agreement or divorce that	at you did no	ot
	■ No		☐ Del	ots to pension o	or profit-sharin	g plans, and other similar debts	3	
	☐ Yes		■ Oth	jer. Specify	udgment c 11-SC-607	reditor in Ogle Co. cas	e	

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 19 of 41

Debtor 1 Anita F Gulley Case number (if know) 4.2 \$397.00 Creditors Protection S Last 4 digits of account number 8998 Nonpriority Creditor's Name Po Box 4115 When was the debt incurred? Opened 8/11/11 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Camelot Radiology Associates ☐ Yes 4.3 Jeffrey D Rosenberg \$4,989.34 Last 4 digits of account number C381 Nonpriority Creditor's Name Susan L Rosenberg When was the debt incurred? 2016 1328 Twombly Rd Malta, IL 60150-8716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No judgment creditor in Ogle Co. case ☐ Yes Other. Specify #16-SC-381 Last 4 digits of account number 4.4 Midland Credit Mgmt 1050 \$11,437.97 Nonpriority Creditor's Name c/o FA Janello Esq When was the debt incurred? 2002 207 W Jefferson St Ste 602 Bloomington, IL 61701-3961 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts judgment creditor in DeKalb Co. case ☐ Yes Other. Specify #02-SC-1050

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 20 of 41

Debic	Anita F Guiley		Case number (if know)	
4.5	Mutual Mgmt	Last 4 digits of account number	9246	\$65.00
	Nonpriority Creditor's Name 401 E State	When was the debt incurred?	Opened 11/02/11	
	Rockford, IL 61104		to OL I HILL I	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	, ,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Par	yment Data	
4.6	Providian National Bank	Last 4 digits of account number	M279	\$25,900.94
	Nonpriority Creditor's Name c/o AR Howarter Esa	When was the debt incurred?	1999	, .,
	208 1/2 W Main St Ottawa, IL 61350			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify #99-LM-279	reditor in Ogle Co. case	
4.7	Ronald L Rice	Last 4 digits of account number	C429	\$5,019.68
	Nonpriority Creditor's Name	_		, , , , , , , , , , , , , , , , , , ,
	c/o Jill L Olson Esq 407 W State St Ste 6	When was the debt incurred?	1998	
	Sycamore, IL 60178-1455		in Ohankall that analy	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debte	
	■ NO			
	☐Yes	Other. Specify #98-SC-429	reditor in DeKalb Co. case	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Entered 09/30/17 20:14:05 Desc Main Case 17-82305 Doc 1 Filed 09/30/17 Page 21 of 41 Case number (if know) Document

Debtor 1 Anita F Gulley

Morrison, IL 61270-2852

Name and Address **Allied Business Accounts Inc** c/o Law Office of Wm R Shirk PC 301 E Main St

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 53,016.61
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 53,016.61

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main

		17/7/11111	· · · · · · · · · · · · · · · · · · ·	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Anita F Gulley			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Rochelle Property Management 515 5th Ave Rochelle, IL 61068-1506	month to month lease for upstairs apartment at 427 1/2 N 6th St, Rochelle, IL for $500/mo$.

		Document	Page 23 of	41	
Fill in thi	s information to identify your	case:			
Debtor 1	Anita F Gulley				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
	5.				
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case nun	nber				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
ill it out, a vour nam 1. Do No Ye 2. Wi Arizo No	and number the entries in the e and case number (if known) you have any codebtors? (If	boxes on the left. Attach the Answer every question. you are filing a joint case, do not lived in a community proper Nevada, New Mexico, Puerto use, or legal equivalent live with	ot list either spouse as rty state or territory? Rico, Texas, Washing	this page. On the top is a codebtor. (Community property pton, and Wisconsin.)	eeded, copy the Additional Page, of any Additional Pages, write states and territories include with you. List the person shown
in lin Form	e 2 again as a codebtor only i	f that person is a guarantor o	or cosigner. Make su	re you have listed the	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Robert J Easterbrooks Jr 709 Lincoln Way Apt 1 Rochelle, IL 61068			☐ Schedule D, lin ■ Schedule E/F, ☐ Schedule G ☐ Jeffrey D Rosen	line4.3

Schedule H: Your Codebtors

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 24 of 41

Fill	in this information	to identify your ca	ase:							
Del	btor 1	Anita F Gulle	еу							
	btor 2 buse, if filing)					_				
Uni	ited States Bankru	otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
_	se number nown)						Check if this i An amend A suppler 13 income	led filing nent showing	g postpetitior	
0	fficial Form	106 <u>l</u>					MM / DD/	YYYY	J	
S	chedule I:	Your Inc	ome							12/15
sup spo atta	plying correct info use. If you are se ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and you ith you, do not incl	r spouse i ude infori	is living mation	ı with you, ind about your sı	lude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your emp	loyment		Debtor 1			Debtor	2 or non-fi	ling spouse	
	If you have more		Employment status	■ Employed			☐ Emp	loyed		
attach a separate page with information about additional		, 0	Employment status	☐ Not employed			☐ Not employed			
	employers.		Occupation	CNA						
	Include part-time self-employed we		Employer's name	Unity Hospice LLC	of Weste	ern IL				
	Occupation may or homemaker, if		Employer's address	1201 S 7th St S Rochelle, IL 61						
			How long employed to	here? 5 yr						
E sti spoi	imate monthly incuse unless you are	separated.	ate you file this form. If your than one employer, co	, ,	·	•		·	·	Ü
mor	e space, attach a s	separate sheet to	this form.				·			
						F	or Debtor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	1,943.96	\$	N/A	
3.	Estimate and lis	st monthly overti	ime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	1,943.96	\$	N/A	

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 25 of 41

Debt	or 1	Anita F Gulley	-	C	ase	number (<i>if ki</i>	nown)				
						Debtor 1		nc	or Debtor on-filing s	spouse	
	Cop	by line 4 here	4.		\$	1,943	3.96	\$_		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	388	3.18	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b).	\$ [—]		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c	: .	\$	(0.00	\$	-	N/A	<u></u>
	5d.	Required repayments of retirement fund loans	5d	i.	\$	(0.00	\$		N/A	<u>\</u>
	5e.	Insurance	5e		\$	(0.00	\$		N/A	<u>\</u>
	5f.	Domestic support obligations	5f.		\$_		0.00	. \$_		N/A	_
	5g.	Union dues	5g		\$		0.00	. \$_		N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	(0.00	+ \$		N/A	<u>\</u>
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		3.18	. \$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,555	5.78	. \$_		N/A	<u>\</u>
8.	List 8a.	a all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		c			Φ			
	8b.	monthly net income. Interest and dividends	8a 8b		\$_ \$		0.00 0.00	. \$ ₋ \$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			_			. '-		-	_
	٠.	settlement, and property settlement.	8c		\$		0.00	. \$_		N/A	_
	8d.	Unemployment compensation Social Security	8d		\$_ \$		0.00 0.00	. \$ \$		N/A N/A	
	8e. 8f.	Other government assistance that you regularly receive	8e	<i>;</i> .	Φ		J.UU	Ф		IN/A	<u>\</u>
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	(0.00	\$_		N/A	<u>\</u>
	8g.	Pension or retirement income	8g		\$		0.00	\$		N/A	<u>\</u>
	8h.	Other monthly income. Specify:	8h	1.+	\$	(0.00	+ \$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		(0.00	\$_		N/	Ά.
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,555.78	+ \$		N/A	= \$	1,555.78
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,333.76	T Ψ		- 17/A	- Ψ -	1,333.76
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•			Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	1,555.78
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Comb	ined Ily income
	=	Voc Evalain:									

Official Form 106I Schedule I: Your Income page 2

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 26 of 41

	in this informa	tion to identify yo	our case:			I				
Deb		Anita F Gulle				Ch	eck if this	is:		
Dob	An amended filing									
	Debtor 2 A supplement showing postpetition chapter (Spouse, if filing) A supplement showing postpetition chapter 13 expenses as of the following date:									
Unite	ed States Bankr	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	IOIS		MM / D	D / YYYY		
	e number nown)									
Of	ficial Fo	rm 106J				-				
Sc	chedule	J: Your I	Exper	ises					12/1:	
Be a	as complete a	and accurate as	possible eded, atta	If two married people a ch another sheet to this						
Part		ibe Your House	hold							
1.	Is this a joir No. Go to									
		s Debtor 2 live i	n a separ	ate household?						
	□N		et file Offici	al Form 106J-2, <i>Expense</i>	s for Sanarata Hous	ehold of De	abtor 2			
2.		e dependents?	No □	ari 01111 1000 2, <i>Experise</i>	s for departie flous	crioid of De	DIOI 2.			
۷.	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dep age	endent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Daughter		13		■ Yes □ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	expenses of	oenses include f people other th d your depender	^{han} ⊓	No Yes					1 103	
Pari		ate Your Ongoi		v Evnansas						
Esti	imate your ex	penses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a sup						
the		h assistance and		government assistance luded it on <i>Schedule I:</i>				Your exp	enses	
4.		or home owners		ses for your residence.	Include first mortgag	je 4.	\$		500.00	
	. ,	led in line 4:	o ground d	i iot.			·			
							Φ.			
		estate taxes rty, homeowner's	or renter	's insurance		4a. 4b.			0.00	
		•		ipkeep expenses		40. 4c.	·		0.00	
		owner's associat				4d.	\$		0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	ome equity loans	5.	\$		0.00	

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 27 of 41

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. \$ 10.0 9. Clothing, laundry, and try cleaning 9. \$ 25.0 10. Personal care products and services 10. \$ 25.1 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance specify: 15d. Other insurance. Specify: 17d. Other. Specify: 17e. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments or Vehicle 1 lines 4 or 5 of this form or on Schedule I: Your Income 20a. Mortgages on other property 20a. Maintenance, repair, and upkeep expenses 20b. \$ 0.00 20d. Maintenance, repair, and upkeep expenses	
6a. Electricity, heat, natural gas 6a. \$ 180.4 6b. Water, sewer, garbage collection 6b. \$ 0.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 45.5 6d. Other. Specify: 6d. \$ 0.0 7. Food and housekeeping supplies 7. \$ 500.0 8. Childcare and children's education costs 8. \$ 10.9 9. Clothing, laundry, and dry cleaning 9. \$ 25.6 10. Personal care products and services 10. \$ 25.1 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.6 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. 15. 15. 15. 15. Urbinisurance deducted from your pay or included in lines 4 or 20. 15. 9. 15a. Urbinisurance 15b. \$ 0.0 15b. Urbinisurance. Specify: 15c. \$ 35.3 15d. Other insu	
6b. Water, sewer, garbage collection 6b. \$ 0.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 45.0 6d. Other. Specify: 6d. \$ 0.0 7. Food and housekeeping supplies 7. \$ 500.0 8. Childcare and children's education costs 8. \$ 10.0 9. Clothing, laundry, and dry cleaning 9. \$ 25.5 10. Personal care products and services 10. \$ 25.1 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 15. Insurance. 12. \$ 200.0 15. Insurance. 15.0 15.0 15. Insurance. 15.0 15.0 15. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15.6 \$ 15. Vehicle insurance 15.0 \$ 0.0 15. Vehicle insurance. Specify: 15.0 \$ 0.0 16. Taxes. Do not include taxes deducted from you)0
6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 5 45.6 d. Other. Specify: 6d. 0.0.0 7. Food and housekeeping supplies 7. \$ 500.0 8. Childcare and children's education costs 8. \$ 10.0 9. Clothing, laundry, and dry cleaning 9. \$ 25.5 9. Clothing, laundry, and dry cleaning 9. \$ 25.5 10. Personal care products and services 11. \$ 25.0 11. Medical and dental expenses 11. \$ 200.0 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. Do not include ain surance deducted from your pay or included in lines 4 or 20. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. \$ 0.0 15b. Health insurance 15c. \$ 0.0 15c. Vehicle insurance. Specify 15d. 0.0 15d. Other insurance. Specify 15d. 0.0 15d. Other insurance. Specify 16d. 0.0 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.0 15d. Car payments for Vehicle 1 17a. 0.0 17d. Car payments for Vehicle 2 17b. 0.0 17d. Other. Specify 17d. 0.0 17d. Other. Specify 17d. 0.0 17d. Other. Specify 0.0 17d. Other. Specify 0.0 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106b). 18 0.0 19d. Other payments you make to support others who do not live with you. 0.0 19d. Other payments you make to support others who do not live with you. 0.0 20d. Mortgages on other property 20a. 0.0 20d. Mortgages on other property 20a. 0.0 20d. Poperty, homeower's, or renter's insurance 20d. 0.0 20d. Maintenance, repair, and upkeep expenses 20d. 0.0 20d. Maintenance, repair, and upkeep	
6d. Other. Specify: 6d. \$ 0.0	
7. Food and housekeeping supplies 7. \$ 500.0 8. Childcare and children's education costs 8. \$ 10.0 9. Clothing, laundry, and dry cleaning 9. \$ 25.0 10. Personal care products and services 10. \$ 25.0 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. 0.0 15. \$ 0.0 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15b. \$ 0.0 15b. Health insurance 15c. \$ 0.0 0.0 15c. Vehicle insurance. Specify: 15c. \$ 0.0 0.0 15c. Vehicle insurance Specify: 15c. \$ 0.0 0.0 15c. Vehicle insurance Specify: 15c. \$ 0.0 0.0 15c. Vehicle insurance Specify: 15c. \$ 0.0 0.0	
8. Childcare and children's education costs 8. \$ 10.0 9. Clothing, laundry, and dry cleaning 9. \$ 25.0 10. Personal care products and services 10. \$ 25.0 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. 200.0 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. \$ 0.0 15b. Health insurance 15c. Vehicle insurance. 15c. \$ 0.0 15c. Vehicle insurance. Specify: 15d. \$ 0.0 15d. Other insurance. Specify: 15d. \$ 0.0 17c. Vehicle insurance. Specify: 15d. \$ 0.0 17c. Vehicle insurance Specify: 15d. \$ 0.0 17c. Vehicle insurance. Specify: 15d. \$ 0.0 17c. Vehicle insurance. Specify: 15d. \$ 0.0 17c. Vehicle insurance. Specify: 17d. \$ 0.0	
9. Clothing, laundry, and dry cleaning 9. Sepresonal care products and services 10. Medical and dental expenses 10. Medical and dental expenses 11. Separation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Sentertainment, clubs, recreation, newspapers, magazines, and books 13. Sentertainment, clubs, recreation, newspapers, magazines, and books 13. Sentertainment, clubs recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Sentertainment, clubs recreation, newspapers, magazines, and books 15. Sentertainment, clubs recreation, magazines, and books 15. Sentertainment, clubs recreation, magazines, and sounces, be extended to the sentertain face. 15. Sentertainment, clubs recreation, post recreation, post recreation, post recreation, post recreation, post recreation, post recreation, pos	
10. Personal care products and services 10. \$ 25.0 11. Medical and dental expenses 11. \$ 120.0 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.0 15b. Health insurance 15b. \$ 0.0 15c. Vehicle insurance 15b. \$ 0.0 15c. Vehicle insurance 15c. \$ 35.3 15d. Other insurance. Specify: 15c. \$ 0.0 15c. Vehicle insurance 15b. \$ 0.0 15c. Vehicle insurance 15c. \$ 0.0 15c. Vehicle insurance 15c	
11. Medical and dental expenses 11. \$ 120. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 0.0 15a. Life insurance 15a. \$ 0.0 0.0 0.0 0.0 0.0 .	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 200.0	
Do not include car payments. 12. \$ 200.0	
14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.0 15b. Health insurance 15b. \$ 0.0 0.0 15c. Vehicle insurance. Specify: 15c. \$ 0.0 35c. \$ 0.0 15d. Other insurance. Specify: 15d. \$ 0.0 0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. \$ 0.0 0.0 17a. Car payments for Vehicle 1 17a. \$ 160.0 0.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 0.0 17c. Other. Specify: 17c. \$ 0.0 0.0 17d. Other. Specify: 17c. \$ 0.0 0.0 17d. Other. Specify: 17c. \$ 0.0 0.0 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 20a. Mortgages on other property 20a. \$ 0.0 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Pr)0
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Life insurance 15b. Life insurance 15b. S. O.C. 15b. Health insurance 15b. S. O.C. Other insurance. Specify: 15d. S. O.C. Other insurance. Specify: 15d. S. O.C. O.C. Other insurance. Specify: 16c. S. O.C.)5
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.0 15b. Health insurance 15b. \$ 0.0 15c. Vehicle insurance 15c. \$ 35.5 15d. Other insurance. Specify: 15d. \$ 0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.0 17a. Car payments for Vehicle 1 17a. \$ 160.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 10. 0.0 0.0 0.0	00
15a. Life insurance 15a. \$ 0.0 15b. Health insurance 15b. \$ 0.0 15c. Vehicle insurance 15c. \$ 35.3 15d. Other insurance. Specify: 15c. \$ 35.3 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5pecify: 16. \$ 0.0 17. Installment or lease payments: 17a. \$ 160.0 17b. \$ 0.0 17b. Car payments for Vehicle 1 17a. \$ 160.0 17b. \$ 0.0 17c. Other. Specify: 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17c. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 19. 0.0 0.0 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$	_
15b. Health insurance 15b. \$ 0.0 15c. Vehicle insurance 15c. \$ 35.3 15d. Other insurance. Specify: 15d. \$ 0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.0 17. Installment or lease payments: 17a. \$ 160.0 17b. Car payments for Vehicle 1 17a. \$ 160.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 19. 20. Mortgages on other property 20a. \$ 0.0 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and up	
15c. Vehicle insurance 15c. \$ 35.5 15d. Other insurance. Specify: 15d. \$ 0.0 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5 0.0 Specify: 16. \$ 0.0 17. Installment or lease payments: 17a. \$ 160.0 17b. Car payments for Vehicle 1 17a. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 0.0 Specify: 19. 19. 0.0)0_
15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.0 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.0 Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0	33
Specify: 16. \$ 0.0 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 160.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0)0
17a. Car payments for Vehicle 1 17a. \$ 160.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other Specify: 17d. Other Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0)0
17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
17d. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 18d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18d. Specify: 19d. Specify: 19d. Specify: 20d. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Specify: 20d. Maintenance, repair, and upkeep expenses 20d. Specify: 21d. Specif)0
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0)0
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses O.0 0.0 0.0 0.0 0.0 0.0 0.0 0.)0
19. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 0.0	10
Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	<u>)U</u>
20a.Mortgages on other property20a.\$20b.Real estate taxes20b.\$20c.Property, homeowner's, or renter's insurance20c.\$20d.Maintenance, repair, and upkeep expenses20d.\$	
20b. Real estate taxes20b. \$20c. Property, homeowner's, or renter's insurance20c. \$20d. Maintenance, repair, and upkeep expenses20d. \$	10
20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0	
20d. Maintenance, repair, and upkeep expenses 20d. \$	
20e. Homeowner's association or condominium dues 20e. \$ 0.0	
21. Other: Specify: 21. +\$ 0.0	<u>)U</u>
22. Calculate your monthly expenses	
22a. Add lines 4 through 21. \$ 1.800.38	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	-
22c. Add line 22a and 22b. The result is your monthly expenses.	-
1,000.30	-
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	78
23b. Copy your monthly expenses from line 22c above. 23b\$ 1,800.3	38
23c. Subtract your monthly expenses from your monthly income. The result in your monthly expenses from your monthly income.	20
The result is your monthly net income. 23c. \$ -244.6	JU
OA De van annat en insuesa en de van en la van annan en visit in de van en est en van die de la terro	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease becaus	e of a
modification to the terms of your mortgage?	e oi a
■ No.	
Tyes Explain here:	

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 28 of 41

Fill in this inform	nation to identify your	case:			
Debtor 1	Anita F Gulley				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
Official Forn Declarat		ın Individual	Debtor's Sc	hedules	12/15
You must file this obtaining money years, or both. 18	s form whenever you fi or property by fraud in B U.S.C. §§ 152, 1341, 1	le bankruptcy schedules n connection with a bank		Making a false state	ment, concealing property, or 0, or imprisonment for up to 20
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	lame of person				cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaratio	n and

X /s/ Anita F Gulley Anita F Gulley

Signature of Debtor 1

Date September 30, 2017

Signature of Debtor 2

Date

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 29 of 41

Fill in this inform	ation to identify your	case:				
Debtor 1	Anita F Gulley First Name	Middle Name	La	st Name		
Debtor 2	First Name	Middle Norse		at Name		
(Spouse if, filing)	First Name	Middle Name		st Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLING	DIS		
Case number						
(if known)					☐ Check if the companded	
					amended	illing
Official For	m 108					
Statemen	t of Intention	on for Indiv	iduals F	iling Under Char	oter 7	12/15
	idual filing under cha	• •	out this form if	:		
_	claims secured by ye					
	ed personal property			nkruptcy petition or by the dat	te set for the meeting of	creditors
	er is earlier, unless t			. You must also send copies to		
	ople are filing togethed	er in a joint case, bot	h are equally re	esponsible for supplying corre	ct information. Both del	otors must
	nd accurate as possi ur name and case nu		needed, attach	a separate sheet to this form.	On the top of any additi	ional pages,
Part 1: List You	ur Creditors Who Ha	ve Secured Claims				
•	•	Part 1 of Schedule D:	Creditors Who	Have Claims Secured by Prop	perty (Official Form 106D)), fill in the
information bell Identify the cred	ow. ditor and the property	that is collateral	What do you	intend to do with the property	that Did you claim	the property
			secures a del	ot?	as exempt on	Schedule C?
Creditor's Ce	entralill		☐ Surrender t	he property.	□ No	
name:				property and redeem it.	-	
Description of	2003 Pontiac Gra	nd Am 195000		property and enter into a ion Agreement.	■ Yes	
property	miles			property and [explain]:		
securing debt:						
Dark O. Higt Vo.	un Un averina d Dana an	al Duamantu I agas				
	ur Unexpired Person d personal property l		n Schedule G:	Executory Contracts and Unex	cpired Leases (Official F	orm 106G), fill
in the information	below. Do not list re	al estate leases. Une	expired leases a	are leases that are still in effec not assume it. 11 U.S.C. § 365	t; the lease period has n	ot yet ended.
Describe your un	expired personal pro	perty leases			Will the lease be as	ssumed?
Lessor's name:					□ No	
Description of leas	sed				_	
Property:					☐ Yes	
Lessor's name:					□ No	
Description of leas	sed				_ 140	
Property:					☐ Yes	
Lessor's name:					□ No	

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 30 of 41

Del	otor 1 Anita F Gulley	Case number (if known)
	scription of leased perty:	☐ Yes
Des	sor's name: scription of leased perty:	□ No
Des	sor's name: cription of leased	□ No
Les	perty: sor's name: scription of leased	☐ Yes
	perty: sor's name:	☐ Yes
Des	perty:	□ Yes
Und	er penalty of perjury, I declare that I have indicated my intention perty that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X	/s/ Anita F Gulley Anita F Gulley Signature of Debtor 1	XSignature of Debtor 2
	Date September 30, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82305 Doc 1 Filed 09/30/17 Entered 09/30/17 20:14:05 Desc Main Document Page 35 of 41

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re Anita F Gulley		Case No.		
	-	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the compensation paid to me within one year before the filing of the petition in bankruptcy, or agree be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy				ed to be paid to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	abers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compen- copy of the agreement, together with a list of the na	sation with a person or persons vames of the people sharing in the	who are not members compensation is att	s or associates of my law firm. A ached.	
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspect	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, stac. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured control of the secured creditors to reaffirmation agreements and applications of the secured control of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reafficient creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirm the secured creditors the secured creditors to reaffirm the secured creditors to reaffirm the secured creditors the	tement of affairs and plan which tors and confirmation hearing, an reduce to market value; ex- ons as needed; preparation	n may be required; and any adjourned hea emption planning	arings thereof;	
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			es, relief from stay actions or	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for i	representation of the debtor(s) in	
-	September 30, 2017 Date	Is/ Stephen A. Clark Stephen A. Clark Signature of Attorne Stephen A. Clark PO Box 683 DeKalb, IL 60115 815-766-2160 Fa sc@clarkbklaw.c	6296092 cy , Attorney at Law -0683 xx: 888-388-5154		

RETAINER AGREEMENT

THIS RETAINER AGREEMENT IS MADE BY AND BETWEEN

Stephen A. Clark, Attorney at Law (815) 766-2160 P.O. Box 683 DeKalb, IL 60115-0683 E-mail: sc@clarkbklaw.com

(Hereinafter referred to as "Attorney," and;)

Anita F. Gulley 427 1/2 N. 6th St. Rochelle, IL 61068

(Hereinafter referred to as "Client.")

Collectively, Attorney and Client are hereinafter referred to as the "Parties."

WITNESSETH

WHEREAS, Attorney has expertise in the representation of clients in debt and bankruptcy matters and associated proceedings related thereto; and

WHEREAS, Client require representation in managing creditors;

WHEREAS, Client desires to retain Attorney to represent him/her with respect to Client's personal bankruptcy matters and to provide such services as an independent contractor, and Attorney is agreeable to such a relationship and/or arrangement, and the Parties desire a written document formalizing and defining their relationship and evidencing the terms of their agreement; and

THEREFORE, in consideration of the mutual covenants contained herein and other good and valuable consideration, it is agreed as follows:

- 1. Appointment: Client hereby appoints Attorney as his/her counsel and hereby retains and employs Attorney upon the terms and conditions of this Agreement.
- 2. Engagement: Attorney hereby accepts said Retainer Agreement and agrees to represent Client upon the terms and conditions of this Agreement.
- 3. Authority and Description of Services: During the term of this Agreement Attorney shall provide such professional services and advice in connection with such matters as are specifically requested by Client, or as in the professional judgment of Attorney are reasonably necessary.
- 4. Term of Agreement: This Agreement shall become effective upon execution hereof and shall continue thereafter and remain in effect until the resolution of the case, or until the earlier termination by one of the Parties as provided herein.

- Advance Payment Retainer: Attorney represents client on a pro bono basis. No payment for 5. services is required under this agreement. Attorney shall provide Client with basic services in connection with Client's Chapter 7 bankruptcy. Basic services include, but are not limited to (1) Review and analyze Client's financial circumstances based on information provided by Client; (2) If possible and to the extent possible, based on the information provided by Client, advise Client of the Client's pre-filing options, including but not limited to bankruptcy options. (3) Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient. (4) Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing. (5) Preparation and filing of the petition, schedules and statements. (6) Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney participation required in such proceeding, including but not limited to, appearances at Court hearings, representation at the meeting of creditors, preparation of legal memoranda, communication with opposing counsel and parties, and submitting information pursuant to requests from the trustee, and other routine services not specifically stated. (7) Take creditor calls both pre-filing and post-filing. (8) If Client's proceeding requires additional, but not customary work. Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided. Parties agree that the following matters are not included within the scope of this Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take action for Client, without a separate Retainer Agreement and payment of an additional advance payment retainer. (1) Motions to Revoke a Discharge. (2) Removal of a pending action in another court. (3) Obtaining title reports. (4) The determination of real estate or tax liens. (5) Appeals to Bankruptcy Appellate Panel, District Court, or Court of Appeals. (6) Correcting credit reports. (7) Negotiations with Check Systems regarding Client. (8) Any adversary proceeding filed by the local panel interim trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargeability of debts, such as those proceedings filed under 11 U.S.C. §§ 523 and 727. (9) Redemption and replacement loan review and motions, and related work pursuant to §722. (10) Client agrees that preparation of amendments to schedules incurring a court filing fee and delays caused by Client's failure to appear at the Meeting of Creditors are also non-basic services.
- Duties of Client: The duties of Client are as follows:
- a. Client shall supply Attorney on a regular and timely basis with all information and documents relevant to the issues in the case, or requested by Attorney, or responsive to any discovery initiated in the case.
- b. Client shall be responsible for advising Attorney of any information or documents that would affect the accuracy of any prior information given to Attorney.
- c. Client shall make herself/himself available for a deposition or examination in the case, if requested.
- d. Client shall assist in any negotiations for settlement of the case.
- e. Because Attorney shall rely on such information to be supplied by Client, all such information shall be true, accurate, complete, and not misleading, in all respects.
- f. Client shall keep herself/himself advised of the progress of the case and shall act diligently and promptly in reviewing materials submitted to her/him by Attorney and shall inform Attorney of any inaccuracies contained therein or objections thereto within a reasonable time so as to enable Attorney to make any corrections.
- g. Client shall otherwise cooperate fully and timely with Attorney to enable Attorney to perform its duties and obligations under this Agreement.

ag

- 7. Compensation, Billing, and Payment: Attorney shall not be compensated for services hereunder at any rate per hour for services to Client. In addition to the above amounts, Attorney shall be reimbursed for all reasonable and necessary costs and advanced on behalf of Client. Attorney has a policy that in the event a payment is not made on the date due, then in that event work may be suspended, without notice, until such a time as arrangements have been made for payment.
- 8. Termination of Agreement: This Agreement may be terminated by either party prior to the conclusion of the case by written notice to the other. It is specifically agreed that in the event the Client fails or refuses to cooperate with Attorney or fails or refuses to make timely payment of the compensation set forth in this agreement, Attorney shall have the right to suspend any further performance under this agreement until such time as payment is made, or upon notice to Client, terminate this Agreement and withdraw from the case. In such event all compensation shall become immediately due and payable. If a case is not filed by September 30, 2017, attorney will terminate the attorney-client relationship.
- 9. Notices: Notice hereunder may be written or oral and if written, shall be addressed to the party at the address shown above or at such address as the party may designate and may be given in person or by first class mail, postage prepaid, facsimile, or email. Notice in person, by facsimilie, or by email shall be effective immediately. Notice by first class mail, postage prepaid, shall be effective three (3) days after mailing.
- 10. Default: In the event Client fails to pay any amount due to Attorney hereunder, Attorney shall be entitled in any action brought to enforce this Agreement to recover all costs and expenses incurred, including reasonable attorney fees.
- 11. Return or Records: Upon termination of this Agreement, Attorney, shall make available to Client all items that are in the control of Attorney that are property of or relate to the case, except that the Attorney may retain copies of anything returned to Client.
- 12. Disclaimer by Attorney: Attorney makes no representation to Client or others with respect to the results to be achieved in the case.
- 13. Ownership of Materials: All right, title, and interest in and to materials to be produced by Attorney in connection with this Agreement and other services to be rendered under said Agreement shall be and remain the sole and exclusive property of Attorney, except in the event Client performs fully and timely its obligations hereunder Client shall be entitled to receive, upon request, one copy of all such materials, and shall be entitled to the non-exclusive rights to use all such materials.
- 14. Miscellaneous:
- a. Time is hereby made of the essence of this Agreement with respect to the performance by the parties of their respective obligations hereunder.
- b. This Agreement contains the entire agreement of the parties. It is declared by the Parties that there are no other oral or written agreements or understanding between them affecting this Agreement or relating to the business of Attorney. This Agreement supersedes all previous agreements between Attorney and Client.

- c. This Agreement may be modified or amended provided such modifications or amendments are mutually agreed upon by the Parties and that said modifications or amendments are made only by an instrument in writing signed by the Parties or an oral agreement to the extent that the parties carry it out.
- d. The failure of either party, at any time to require such performance by any other party shall not be constructed as a waiver of such right to require such performance, and shall in no way affect such party's right to require such performance and shall in no way affect such party's right subsequently to require a full performance hereunder.
- e. THIS AGREEMENT IS EXECUTED PURSUANT TO AND SHALL BE INTERPRETED AND GOVERNED FOR ALL PURPOSES BY THE LAWS OF THE STATE OF ILLINOIS. ANY ACTION BROUGHT UNDER THIS AGREEMENT SHALL BE BROUGHT IN AND ONLY IN THE CIRCUIT COURT OF DEKALB COUNTY, ILLINOIS AND THE PARTIES WAIVE ANY OBJECTION TO JURISDICTION OR VENUE IN SUCH COURT.
- f. If any provision of this Agreement shall be held to be contrary to law, void, invalid or unenforceable for any reason, such provision shall be deemed severed from this Agreement and the remaining provisions of this Agreement shall continue to be valid and enforceable. If a Court finds that any provision of this Agreement is contrary to law, void, invalid of unenforceable and that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.
- g. This Agreement may be executed in counterparts, notwithstanding the date or dates upon which this Agreement is executed and delivered by any of the parties, and shall be deemed to be an original and all of which shall constitute one agreement effective as of the reference date first written below. An executed faxed copy of this Agreement shall be construed by all parties hereto as an original version of the Agreement.
- h. CO-COUNSEL: Client authorizes Attorney to hire co-counsel or independent attorneys as needed, at Attorney's expense, to work on this matter and divide fees with them on the basis of work and responsibility. Client authorizes Attorney, at its discretion, to have attorneys within the firm, or outside counsel, review Client's file to explore other potential causes of action Client may have against creditors.

IN WITNESS THEREOF, THE PARTIES hereto have set forth hands and seal in execution of this Agreement on: 6 SEPTEMBER 2017.

1 Sulley

ANITA F. GULLEY

STEPHEN A. CLARK ATTORNEY AT LAW

United States Bankruptcy Court Northern District of Illinois

In re	Anita F Gulley		Case No.		
		Debtor(s)	Chapter 7		
	VE	RIFICATION OF CREDITOR M	IATRIX		
		Number of	Creditors:	10	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	September 30, 2017	/s/ Anita F Gulley Anita F Gulley Signature of Debtor			

Allied Business Accounts Inc c/o Law Office of Wm R Shirk PC 301 E Main St Morrison, IL 61270-2852

Allied Business Accounts, Inc. PO Box 1600 Clinton, IA 52733-1600

Centralill 2587a Sycamore Road De Kalb, IL 60115

Creditors Protection S Po Box 4115 Rockford, IL 61101

Jeffrey D Rosenberg Susan L Rosenberg 1328 Twombly Rd Malta, IL 60150-8716

Midland Credit Mgmt c/o FA Janello Esq 207 W Jefferson St Ste 602 Bloomington, IL 61701-3961

Mutual Mgmt 401 E State Rockford, IL 61104

Providian National Bank c/o AR Howarter Esq 208 1/2 W Main St Ottawa, IL 61350

Robert J Easterbrooks Jr 709 Lincoln Way Apt 1 Rochelle, IL 61068

Ronald L Rice c/o Jill L Olson Esq 407 W State St Ste 6 Sycamore, IL 60178-1455